Refrigeration Permit

1. Address	F/R	SHORT FORM Application for			
2. Type of Work □ Erect □ Addition □ Alteration Same □ Alteration New Use □ Repair □ Repair—Order of Bldg. Dept □ Miscellaneous	Use		REFRIGE	RATION I	PERMIT
3. Description of Work:		Appli	cation #:		
		Т	HIS COLUMN FOF	R DEPARTI	MENT USE ONLY
		EXAMINATION			
☐ Air Cooled ☐ Remote		Ck.	Routing	Date	Approval
□ Water Cooled □ Self Contained			REFRIGERATION		
4. Building Owner:		Code	Р	ERMIT FEES	
Add		30	DEEDICEDATION		
Phone No City		30	REFRIGERATION		
State Zip		ТОТА	AL		
7. Contractor			,		
Add.					
Phone No Lic					
City: State: Zip					
Use of Building:		DUONE #			
CONTACT NAME:	·	PHONE	#:		
The undersigned hereby certifies that the statements in compliance with Chapter 13-192 of the Municipal systems shall not be installed in an enclosed public	Code of Chi	cago an	d the piping associa	ated with the	
SIGNED:					
TITLE:					
ADDRESS:					
OFFICE USE:					
☐ No Stop Work Order					



REFRIGERATION SHORT FORM INFORMATION

Make and model of unit(s)

Number of unit(s)
Number of compressor(s) each unit
Type of compressor(s)
Unit tons total
Refrigerant type
Refrigerant weight per circuit
Air or water cooled
Remote or self-contained
Location of unit(s)
Area the unit(s) serves
PIN # (property index number)

- 1) A copy of contractors' City of Chicago Business License, which is required
- 2) Call Ron Gardner at 312-744-7694, or Steve McGann at 312-744-6488, before coming to City Hall to obtain permit
- 3) An Architect or Structural Engineer's letter, (on firm's letterhead), sealed and signed by the person sealing letter for all replacement, rooftop units (original copy)

City of Chicago

Department of Buildings

Refrigeration Bureau

Architect or Structural Engineer's Letter

Date:
Application #:
Project address:
Letter to be on firm's letterhead, sealed and signed by person sealing letter.
Letter must state that the area under consideration, has been <u>visually</u> inspected by an Architect or Structural Engineer licensed by the state of Illinois and that he or she has calculated the new roof load and found it to be safe or that the area needs the following corrections:
Include the number of units, weight of each unit and the outside dimensions of each unit.
Address to:
Executive Director
Department of Buildings
Room # 906
121 N LaSalle St
Chicago, IL 60602
Return Letter to Refrigeration Plan Desk